## SUBSTITUTE DECLARATION AND POWER OF ATTORNEY

Docket No. X-11965

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the invention entitled

## METHOD OF INCREASING BONE TOUGHNESS AND STIFFNESS AND REDUCING FRACTURES

which is described and claimed in the specification which:				
(check  one)	is attached hereto. was filed on 26 September 2000 as United States Application Serial No. 09/647,278			
	PCT International Application and was amended on			
		estand the contents of the above identified led by any amendment referred to above.		
I acknowledge defined 37 C.F		on which is material to patentability as		
I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional patent application(s) listed below.				
	60/097,151	19 August 1998		
(Application N	lumber)	(Filing Date)		
	60/099,746	10 September 1998		
(Application N	Jumber)	(Filing Date)		

<u>Power of Attorney</u>: As a named inventor. I hereby appoint the attorneys and/or agent(s) associated with customer number 25885 to prosecute this application and transact all business in the Patent and Trademark Office.

Send correspondence to the address associated with the customer number.

Docket No. X-11965 Page 2

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full Name of Sole or or First Inventor	;	Gregory A. Gaich
Inventor's Signature	://	Date: 25 Feb 05
Residence Address	:	5744 North Delaware Street Indianapolis, Indiana 46220
Post Office Address	:	SAME AS ABOVE
Citizenship	:	U.S.
Full Name of Second Joint Inventor, if Any:	`	Willard H. Dere
Inventor's Signature	:	Date:
Residence Address	:	1601 Vista Oaks Way Westlake Village Ventura, CA 91361
Post Office Address	:	SAME AS ABOVE
Citizenship	:	U.S.
Full Name of Third Joint Inventor, if Any:	J	anet M. Hock
Inventor's Signature	:	Date:
Residence Address	:	7702 Candlewood Lane Indianapolis, Indiana 46250
Post Office Address	:	SAME AS ABOVE
Citizenship	:	U.S.

## SUBSTITUTE DECLARATION AND POWER OF ATTORNEY

Docket No. X-11965

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the invention entitled

## METHOD OF INCREASING BONE TOUGHNESS AND STIFFNESS AND REDUCING FRACTURES

which is descr	ribed and claimed in the specif	ication which:
(check     one)     or	is attached hereto. was filed on 26 September 20 Serial No. 09/647,278  PCT International Application and was amended on	000 as United States Application  n No. PCT/US99/18961  (if applicable).
I hereby state specification,	that I have reviewed and under including the claims, as amend	rstand the contents of the above identified led by any amendment referred to above.
I acknowledge defined 37 C.I		on which is material to patentability as
	the benefit under Title 35, Unonal patent application(s) listed	nited States Code, §119(e) of any United d below.
	60/097,151	19 August 1998
(Application I	Number)	(Filing Date)
	60/099.746	10 September 1998
(Application N	Number)	(Filing Date)
Power of Atte	orney: As a named inventor, I h customer number 25885 to p	hereby appoint the attorneys and/or agent(s) prosecute this application and transact all

Send correspondence to the address associated with the customer number.

business in the Patent and Trademark Office.

Docket No. X-11965 Page 2

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full Name of Sole or or First Inventor	:	Gregory A. Gaich
Inventor's Signature	:	Date:
Residence Address	:	5744 North Delaware Street Indianapolis, Indiana 46220
Post Office Address	:	SAME AS ABOVE
Citizenship	:	U.S.
Full Name of Second Joint Inventor, if Any:		Willard H. Dere
Inventor's Signature	;	Willard H. Dere Date: 25 February 2005
Residence Address	:	1601 Vista Oaks Way Westlake Village Ventura, CA 91361
Post Office Address	:	SAME AS ABOVE
Citizenship	:	U.S.
Full Name of Third Joint Inventor, if Any:		Janet M. Hock
Inventor's Signature	: .	Date:
Residence Address	:	7702 Candlewood Lane Indianapolis, Indiana 46250
Post Office Address	:	SAME AS ABOVE
Citizenship	:	U.S.

# SUBSTITUTE DECLARATION AND POWER OF ATTORNEY

Docket No. X-11965

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the invention entitled

#### METHOD OF INCREASING BONE TOUGHNESS AND STIFFNESS

	AND KE	EDOCHTO I RACTORES
which is desc	ribed and claimed in the	e specification which:
(check  one)	is attached hereto. was filed on <u>26 Septe</u> Serial No. <u>09/647,278</u>	mber 2000 as United States Application
or	PCT International Apand was amended on	plication No. <u>PCT/US99/18961</u> (if applicable).
I hereby state specification,	that I have reviewed an including the claims, a	nd understand the contents of the above identified s amended by any amendment referred to above.
l acknowledg defined 37 C.	e the duty to disclose in F.R. 1.56.	formation which is material to patentability as
	n the benefit under Title ional patent application(	e 35, United States Code, §119(e) of any United (s) listed below.
	60/097,151	19 August 1998
(Application	Number)	(Filing Date)
	60/099,746	10 September 1998
(Application	Number)	(Filing Date)
Power of Att	orney: As a named inv	ventor, I hereby appoint the attorneys and/or agent(s) 885 to prosecute this application and transact all

PAGE 8/9 \* RCVD AT 4/7/2005 12:19:19 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-1/25 \* DNIS:2738300 \* CSID:317 276 3861 \* DURATION (mm-ss):02-22

Send correspondence to the address associated with the customer number.

business in the Patent and Trademark Office.

Docket No. X-11965 Page 2

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full Name of Sole or or First Inventor	:	Gregory A. Gaich
Inventor's Signature	:	Date:
Residence Address	:	5744 North Delaware Street Indianapolis, Indiana 46220
Post Office Address	:	SAME AS ABOVE
Citizenship	:	U.S.
Full Name of Second Joint Inventor, if Any:		Willard H. Dere
Inventor's Signature	:	Date:
Residence Address	:	1601 Vista Oaks Way Westlake Village Ventura, CA 91361
Post Office Address	:	SAME AS ABOVE
Citizenship	:	U.S.
Full Name of Third Joint Inventor, if Any:		Janet M. Hock
Inventor's Signature	:	/ M Horl Date: 3.24.2005
Residence Address	:	7702 Candlewood Lane Indianapolis, Indiana 46250
Post Office Address	:	SAME AS ABOVE
Citizenship	:	U.S.